



CASE CL/V-32843A

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450

Sara Carter  
Type or print name

*Sara Carter*  
Signature

August 16, 2004  
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

JOSEPH MICHAEL LINDACHER

APPLICATION NO: 10/766,194

FILED: JANUARY 28, 2004

FOR: OPHTALMIC LENS HAVING AN OPTICAL ZONE BLEND DESIGN

Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

This paper is supplemental to the Information Disclosure Statement filed January 28, 2004 and April 20, 2004. Since Applicant believes this paper is being filed before the mailing date of a first Office Action on the merits, no fees are believed to be required under 37 C.F.R. §1.97(b)(3). If a fee is deemed to be required, the Commissioner is hereby authorized to charge such fee to Deposit Account No. 50-2965.

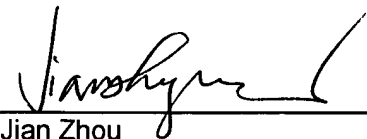
In accordance with 37 C.F.R. §1.56, applicant wishes to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

Copies of these references are enclosed herewith.

The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s).

Respectfully submitted,

CIBA Vision Corporation  
Patent Department  
11460 Johns Creek Parkway  
Duluth, GA 30097-1556  
(678) 415-4691

  
Jian Zhou  
Agent for Applicant  
Reg. No. 41,422

Date: August 16, 2004

## INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

ATTY. DOCKET NO.

CL/V-32843A

APPLICATION NO.

10/766,194

APPLICANT

JOSEPH MICHAEL LINDACHER

FILING DATE

JANUARY 28, 2004

Group



## U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
	AA						
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						

## FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION YES NO	
	AM						<input type="checkbox"/>	<input type="checkbox"/>
	AN						<input type="checkbox"/>	<input type="checkbox"/>
	AO						<input type="checkbox"/>	<input type="checkbox"/>
	AP						<input type="checkbox"/>	<input type="checkbox"/>
	AQ						<input type="checkbox"/>	<input type="checkbox"/>

## OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

	AR	Copy of a PCT Invitation to Pay Additional Fees and Equivalency list
	AS	
	AT	

EXAMINER

DATE CONSIDERED

\*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.